

# THE MEDICAL AND SURGICAL REPORTER: A WEEKLY JOURNAL.

S. W. BUTLER, M. D.,  
W. B. ATKINSON, M. D., } EDITORS.

## CONTENTS.

|  | PAGE |  | PAGE |
|--|------|--|------|
| <b>Original Communications.</b>                    |      | Caries of the Tibia.....                         | 213  |
| On Infantile Convulsions.....                      | 205  | Dislocation of the Thumb.....                    | 213  |
| An extraordinary case of Hernia.....               | 207  | Granular Conjunctivitis.....                     | 213  |
| <b>Illustrations of Hospital Practice.</b>         |      | <b>HOSPITAL OF PHILADELPHIA MEDICAL COLLEGE:</b> |      |
| <b>PENNSYLVANIA HOSPITAL:</b>                      |      | Herpes.....                                      | 214  |
| Pathological Specimen.....                         | 208  | Compound Wound of a Joint.....                   | 214  |
| Metastatic Abscesses.....                          | 208  | Follicular Inflammation of the Fauces.....       | 214  |
| Inflammation of the Brain.....                     | 208  | <b>Reviews and Book Notices.</b>                 |      |
| Diabetes.....                                      | 208  | Malgaigne's Treatise on Fractures.....           | 215  |
| Orethritis.....                                    | 209  | <b>Editorial.</b>                                |      |
| Un-united Fracture of the Humerus.....             | 209  | Medical Service in the Navy.....                 | 216  |
| Paralysis.....                                     | 209  | Criminal and Obscene Quack Literature....        | 217  |
| Enteric Fever.....                                 | 210  | Professor Dickson.....                           | 218  |
| Treatment of Chronic Rheumatism.....               | 210  | M. Groux.....                                    | 218  |
| Wound of the Scalp.....                            | 210  | <b>Periscope.</b>                                |      |
| Fracture of the Skull in a child.....              | 210  | Iridektomia for Chronic Iritis and Choroido-     |      |
| <b>HOSPITAL OF THE UNIVERSITY OF PENNSYLVANIA:</b> |      | iritis.....                                      | 219  |
| Cold Abscess of great size.....                    | 210  | Phalloplasty.....                                | 219  |
| Soft Cataract—Operation.....                       | 211  | Iodide of Potassa—Antigalactic.....              | 220  |
| Papillary growth on Forearm—Excision....           | 211  | Gangrene cured by the use of Pyroligneous        |      |
| Cold Abscess in the Buttock—Evacuation... 211      |      | Acid.....  | 220  |
| Onychia—Extirpation of the Nail.....               | 212  | <b>Medical News.</b>                             |      |
| <b>HOSPITAL OF THE JEFFERSON MEDICAL COLLEGE:</b>  |      | Marriages.....                                   | 220  |
| Chronic Erythema.....                              | 212  | Deaths.....                                      | 220  |
| Cramp, depending upon Muscular Exertion, 212       |      | Marriages of Consanguinity.....                  | 220  |
| Periodical Chills and Headache.....                | 212  | To Correspondents, etc., etc.....                | 220  |
| Headache, with Nausea, etc.....                    | 213  |  |      |

FOREIGN EXCHANGES, BOOKS, ETC., ETC., must be forwarded to us, care of C. J. PRICE & Co., Philadelphia, and SAMSON LOW, SON & Co., London.

PHILADELPHIA:  
PUBLISHED FOR THE EDITORS.  
1858.

# PROSPECTUS OF THE MEDICAL AND SURGICAL REPORTER.

THIS Journal, for many years favorably known as a Monthly, was changed to a Weekly on the 1st of October, 1858.

Its aim will be, as heretofore, to serve the Profession,—especially in its organized capacity—without fear or favor, and entirely untrammelled by outside connections, under the following departments:—

1. Original Lectures on Special Departments of Medicine and Surgery;
2. Original Communications;
3. Illustrations of Hospital Practice; being original reports from the clinical teachings of the Hospitals and Schools of this and other cities;
4. Reports of papers read, and discussions had before Medical Societies;
5. Brief Reviews and Notices of Books;
6. Editorials;
7. Correspondence;
8. A Weekly Domestic and Foreign Periscope;
9. Medical News—including Marriages and Deaths of Physicians, or in their immediate families.

Nothing which our means can command, shall be spared to make the REPORTER an able and acceptable exponent of American Medicine and Surgery. To this end we solicit an earnest and hearty literary and pecuniary support.

**SIZE.**—The REPORTER will be issued on Friday morning of each week, each number consisting of sixteen pages of super-royal octavo size, (somewhat larger than the page of Harper's Monthly). It is the intention of the Proprietor to enlarge it to even double its present size as soon as his subscription list will warrant it. EVEN NOW THE REPORTER IS ONE OF THE CHEAPEST MEDICAL JOURNALS PUBLISHED IN THIS OR ANY OTHER COUNTRY.

**PRICE AND TERMS.**—The subscription price is \$3 00 in advance; single copies, eight cents. The REPORTER will only be sent to those who pay for it. Notice will be given to subscribers at the termination of their subscriptions. Those who desire can subscribe for one or two-thirds of a year. Current paper, gold dollars or postage stamps received in payment.

**ADVERTISEMENTS.**—Communications, Essays, Items of Intelligence, Biographical Sketches of Distinguished Men, Notices of Marriages and Deaths of Physicians, etc., etc., are respectfully solicited.

Address the Editors, Philadelphia, Pa., or the Proprietor, at 701 Arch Street.

S. W. BUTLER, M. D., Editor & Proprietor.  
W. B. ATKINSON, M. D., Associate Editor.

Single copies can be obtained and subscriptions made, as follows:—

- Lindsay & Blakiston's Medical Book Store, No. 23 South Sixth Street, above Chestnut,
- Joseph M. Wilson's, 111 South Tenth Street, below Chestnut, and at
- Taylor & Wetherbee's Drug Store, N. W. corner of Ninth and Chestnut Streets.

# THE Boston Medical and Surgical Journal.

**A Weekly Medical Journal of Thirty Years Standing!**—The Boston Medical and Surgical Journal was commenced as a weekly periodical in the year 1828. During nearly the whole of the time, to the present year, it has been the only weekly periodical of the kind in the United States, and has circulated in every part of the country. There has been no intermission in its regular issue during these thirty years, and it now counts over SIXTEEN HUNDRED consecutive numbers, and is approaching its SIXTIETH volume. Its predecessor, The Boston Medical Intelligencer—also a weekly periodical—was begun in 1823 by J. V. C. Smith, M. D., then Professor of Anatomy in the Berkshire Medical Institution, was issued from the same office till the year first named, when it passed into the hands of Professors Warren, Channing and Ware, of the Medical School of Harvard University, took the name of the present work, and was for awhile edited by those gentlemen. On a change of editors, it became disconnected from the Medical School, and has ever since remained so—being in all respects independent in its associations, and with no interests to advance but those of the regular profession to which it has always looked for support. It is now under the Editorial management of Wm. W. Morland, M. D., and Francis Minot, M. D., who are honorably connected and in good fellowship with the Faculty of Boston, and are allowed the free use of whatever of general interest can be obtained from the various medical institutions of the city. From individual Members of the Profession, not only in Boston but in other and distant parts of the country, valuable literary aid is constantly received, and it is believed no Medical Journal has ever excelled it in the number and respectability of its contributors. The Editors make it their constant aim to present weekly, from the ample sources at their command, a variety of matter which will prove serviceable to the general practitioner, with brief notices of whatever of interest is occurring in the medical world.

The work has at different times been enlarged, and now comprises, in each of its weekly issues, twenty large octavo pages of reading matter, stitched in a cover containing Contents and Advertisements. A Monthly Series is also issued, and is sent to subscribers who prefer the work in that form. Price, for either series, \$3 00 a year, payable in advance. Orders by mail promptly attended to. New volumes commence in February and August of each year. A few complete sets of the Journal, from its commencement, at a reduced price, uniformly bound, may be had of the subscriber.

DAVID CLAPP, Proprietor and Publisher,  
over 184 Washington Street.

Boston, Dec. 13, 1858.

114-137.

## RATES OF ADVERTISING

IN THE

## MEDICAL AND SURGICAL REPORTER.

|  |        |
|--|--------|
| Ten lines or less,   | \$1 00 |
| Every additional line,   | 06     |
| A whole column,  | 6 00   |
| A page,  | 10 00  |
| Ten lines in NONPAREIL, which is the type used, will occupy about one inch of space. |        |

For more than one insertion, there will be an abatement in the rates of charge.

Advertisements payable in advance, except by special contract.

The Editors of the REPORTER will attend to the selection and purchase of Books, Instruments, etc., or to other minor commissions for their Subscribers, free of charge.

# THE MEDICAL AND SURGICAL REPORTER.

WHOLE SERIES, } NO. 114. PHILADELPHIA, DECEMBER 24, 1858. { NEW SERIES, VOL. I. NO. 13.

## Original Communications.

### On Infantile Convulsions.

By GEO. J. ZIEGLER, M. D.,  
of Philadelphia.

In the late discussion before the County Medical Society, on infantile convulsions, one of the speakers is reported to have said, that in those cases in which "we do not dare to bleed, he was often puzzled what to do." Now, as depletion and all other spoliative measures are being justly regarded with distrust, as not only fraught with much evil, but of doubtful benefit, especially in infantile affections, it is important to settle down upon some more certain and philosophic method of reducing arterial and nervous excitement, and of subduing their concomitants. As the experience and suggestions of every one are more or less useful in determining the proper course, I present the following.

In those disturbances of the vascular and nervous systems, attended with local hyperæmia and irregular or undue innervation of any particular part of the economy, and especially of the cerebro-spinal axis, followed by convulsions, I have found the following course of procedure most useful, in allaying the excitement, and in restoring the general vital equilibrium, without leaving any bad effects, or inflicting permanent injury, as bleeding and other perturbative measures so frequently do.

When the convulsions are connected with vascular engorgement of the cerebro-spinal system, as indicated by the congested eye, flushed face, and, in infants, by the fuller distended fontanels, and other well known symptoms, besides the enemata, sinapisms to the

extremities, or mustard pediluvæ, etc., I apply sinapisms or other counter-irritants to the whole surface of the spine, from the occiput to the sacrum, and administer aconite internally. For children, I prefer the tincture of the leaves, as it can be given more freely, with less danger of over-drugging. It should be administered in small and somewhat frequent doses, according to the age of the patient, and necessity of the case. Thus, one drop every hour, or more or less frequently, according to circumstances, to a child one year old. The effect of this remedy, in allaying nervous excitement, reducing the action of the heart and vascular system, in resolving congestion, and in subduing spasmodic action, is sometimes strikingly shown in the speedy disappearance of the blood from the eye, the calming down of the general system, and the subsidence of the spasms.

The veratrum viride is also another very powerful arterial sedative, and anti-spasmodic, applicable to these cases, and no doubt would often prove useful, either alone, or where smaller doses were preferred in combination with the aconite.

When the case is severe or very urgent, and even the small doses of these remedies cannot be so readily introduced into the system, or act with sufficient promptitude, the use of chloroform by inhalation, would be indicated.

Another apparently valuable method of resolving these and other congestions of the head and spine, as well as other parts of the trunk, is by the process termed *hæmostasia*, which is by ligating the limbs, and thus retaining the blood within them, and reducing the quantity of that fluid in the body proper.

Hence, acting as a diverticulum, in withdrawing it from the affected organs.

Still another, and what promises to be a much more efficient plan, is by the method called *hæmospasia*, which acts on the principle of "dry cupping on a large scale," in withdrawing the blood to the surface and extremities. But the difficulty with this is that it cannot be so readily resorted to in private practice. It is, however, only noticed here to direct more attention to it, in the hope that it may be rendered more practical.

In those cases dependent more especially upon cerebro-spinal congestion, cold applied to the spine, by means of ice and other agents, promises to be of much value, as it is a standard remedy in cerebral congestions and inflammations. Besides the evidence of experience itself is in its favor, as it has been successfully employed, not only in infantile spasm, but in tetanus, that most intractable of all convulsive affections.

In those cases in which the convulsion appears to be more exclusively connected with sympathetic irritation, or undue excitement of the general nervous system, hop poultices or other anodynes and anti-spasmodics, applied the whole length of the spine, in conjunction with the internal use of aconite or morphia, or the inhalation of chloroform, will usually soon quiet the system, and check the spasm.

The susceptibility to nervous excitement or convulsive action is, however, often more or less connected with general adynamia; and in these cases as well as in all others of irregular innervation from general debility, applications down the spine, of the stimulant anodynes and anti-spasmodics, with the judicious internal administration of the same, will generally have the desired effect. In this variety, the inhalation of ether, or of ether and chloroform combined, might sometimes be resorted to with advantage. Here, however, an after effort should always be made to overcome the predisposition, by a general tonic course of treatment.

Where the tendency to spasm is very active, and persists for any length of time, permanent counter irritation down the spine, in conjunc-

tion with appropriate internal medication, will be indicated.

As a general thing, then, in spasms dependent upon vascular and nervous excitement, with congestion of the cerebro-spinal axis, counter-irritation by sinapisms, dry cups, or other means, to the spine, or the application of cold thereto, with the internal administration of aconite, or veratrum, or the inhalation of chloroform, will be most applicable. In addition to these, the treatment by the hæmostatic or hæmospastic process may also be put into practice.

In those cases in which nervous excitement predominates, the hop poultice, or other anodyne application to the spine, with the internal exhibition of aconite, morphia, or chloroform by inhalation, will be more strongly indicated, presupposing, of course, in the sympathetic irritation, the removal of the offending cause.

In those cases connected with exhaustion or debility, the application to the spine of hops and garlic, or other anti-spasmodics, either separately or combined, with appropriate internal remedies, will be better adapted to fulfil the indications.

In fact, in all cases attention should be particularly directed to regulate and harmonize the circulation and innervation, and to tranquilize the general system, by suitable external and internal medication, with the non-spoiliative, arterial and nervous sedatives and anti-spasmodics, according to the character, stage, type, intensity, complications, etc., of the derangement.

This plan of influencing the nervous, arterial, and general system, by medicating the spine, is of extensive application, and will often be followed by very beneficial effects. In one case of low fever, in which the patient was in *extremis*, the scale appeared to be turned in favor of recovery by the efficient aid obtained from the free use of spice plasters to the spine.

These very general and desultory remarks on infantile convulsions, are not designed to cover the whole ground, but merely to invite attention to some few points not noticed in the recent discussion on that subject.

## An Extraordinary Case of Hernia.

By T. C. ROGERS, M. D.,

of Willow Grove, Delaware.

Sept. 18th, 1857. I was summoned to visit Jonathan Jackson, who now resides near Magnolia, Del. On my arrival, I obtained from one of his relatives the following synopsis of the antecedent history of his case, viz: "That some two months or more since, whilst lifting a heavy weight, he felt something give way in his right groin and abdomen, which in a few hours produced all the usual symptoms of incarcerated hernia. A physician was sent for, who pronounced it such, but could not succeed in reducing it. A consultation was called, and both together succeeded in the reduction. The patient was ordered to wear a truss, one of the surgeons remarking that 'he would soon be as well as ever, at least well enough to get married in a month or two,' as was his expectation, though he was 64 years of age, and a bachelor! Patient, prior to this affliction, had enjoyed excellent health. A few weeks after this, he grew worse than ever. The same physicians were called in, and after treating him for some time, wrote his *will*, and abandoned the case."

Having been called to the case, on examination I found five patelliform orifices, three in the right hypogastric and pubic regions, and one in the right iliac and abdominal regions, respectively. All the orifices discharging (at intervals) fecal matter, together with particles of undigested beef, cabbage and potatoes, which a kind lady had given him some hours before, as she said "to resist mortification, cool his fever, and keep him from sinking!" Not only a large portion of the omentum and intestines had sloughed away, but also the penis, scrotum, muscular and other tissue surrounding the pelvic extremity of the right femur and os innominatum, had shared the same fate, to a great extent, leaving little behind but the blood vessels, and nerves, etc., which it is known are the last to resist mortification.

I supposed that death was almost inevitable, but as he was able to whisper the following into my ear, I determined to do all I could:

"Rogers, kill me or cure me; you and the devil for it!"

After using some three or four disinfecting agents, in connection with other auxiliaries, the atmosphere of the apartment became quite endurable to what it had been. I then gave him the following:

|   |               |          |    |
|---|---------------|----------|----|
| R | Sp. vin. Gal. | f ̄ iv.  |    |
|   | Morph. sulph. | gr. iij. | M. |

Next, with a strong solution of Castile soap in water, aided by sponges, I succeeded in eradicating the foul accumulation in and about the gangrenous parts. Lastly I poured from one to two tea-spoonfuls of ol. terebinth., into each one of the five orifices, and plugged them up with white silk lint, previously sprinkled with sulphate of morphia, and saturated with a mixture of olive and linseed oils, then applied compound resin cerate to all the ulcerated parts, collodion on the surrounding inflamed surfaces not abraded, and adhesive plaster over all the affected parts, the right leg being kept in a flexed position.

As our worthy editors have enjoined brevity on their correspondents, we will not follow the details further. Suffice it to say, that both internal and external remedies were used as the nature of the case appeared to demand from day to day. Gangrene was arrested adhesive inflammation supervened between the walls of the abdomen and intestines, or the unobliterated parts of them; the excrements evacuated in the natural way in lieu of the artificial; all the apertures and denuded surfaces healed up; and by the first of the following January, he was able to attend to his usual avocation. He required little or no treatment from this time (January) until the ensuing June, when he inadvertently, by over exertion, ruptured the primary-orifice in the right groin. A male catheter could be introduced. The oozing was soon checked by appropriate applications, solid union was soon effected, by the use of a stimulating ointment, and touching the parts a few times with nitrate of silver.

Five months have elapsed since his full recovery. All the disintegrated parts present a



natural appearance, only the right side of the abdomen is smaller than the left, and cicatrices of the closed orifices remain, but like the other parts are covered over with hair. Patient says he feels as well as ever, and expects soon to be married.

Thus we have given the brief history of a case which surely verifies the adage, "As long as there is life there is hope." And moreover, that physicians and surgeons should guard against "giving up a case," even though the prognosis may forbode the most gloomy result.

## Illustrations of Hospital Practice.

### PENNSYLVANIA HOSPITAL.

SATURDAY, DEC. 4.

Service of Dr. Wood.

Reported by T. A. Demme, M. D.

**Pathological Specimen.**—The lungs of a patient that died of phthisis were shown to the class. The pathological appearances of the respiratory organs in these cases are too often seen not to be familiar to all. Dr. W. remarked upon the utter impossibility of inhalations curing consumption. Under certain circumstances the bronchial mucous membrane may be beneficially impressed by vapors or gases inhaled, but it is useless to expect that the proper lung tissue can be permeated by the substances inhaled; yet it is generally in the pulmonary tissue itself that tuberculous deposition occurs.

It is therefore probable that the greatly vaunted results of these remedies in certain cases of phthisis, have been owing to their effect upon the bronchial inflammation which is so apt to occur during the progress of this disease.

[There is probably not another disease for the cure of which physicians are so apt to forsake general principles, and rely, plainly speaking, upon specifics. At one time, inhalations were with many, a *sine qua non* in the treatment—then cod liver oil was regarded as the sheet anchor—and latterly the hypophosphites have been vaunted as the surest preventive of the numerous bills of mortality from consumption. Now, Dr Wood demonstrates the inutility of inhalation. Dr. Samuel Jackson at the head of an army of others, deny any peculiar properties to cod liver oil,

whilst a host bear testimony against the hypophosphites. We do sincerely believe that quinia and iron with proper hygienic directions to the patient, and a firm reliance upon general principles, have enabled us most successfully to combat this terrible foe.]

**Metastatic Abscesses.**—A colored man was presented to the class, who entered the Hospital convalescing from enteric fever, but upon whose shoulder a large abscess had formed, and within the last few days upon each thigh a large and very painful swelling has appeared. In one of these, fluctuation can be now perceived. There is therefore a tendency to the formation of abscesses. It is an interesting question what is the cause of this tendency.

It is my opinion that the blood is affected, that there is a purulent infection of the blood. The ulcers of the intestines, consequent upon, or coincident with enteric fever, have no doubt in this case gone on to suppuration, and some of the pus has been absorbed.

**Treatment.**—This is a constitutional affection, and it is probably good for the patient that these abscesses should form.

The indication is to support the strength: he is taking quinia, nitro-muriatic acid, opium and a good nutritious diet.

**Inflammation of the brain.**—A middle aged colored man was next brought before the class.

He has had an obstinate severe pain in the head for four weeks; he then became extremely restless, and somewhat delirious; pulse frequent but feeble; tongue disposed to be much furred and dry; bowels loose; there was also a marked tendency to draw the head back.

The question that first occurred was, is this a case of cerebral disease or of enteric fever.

That there was inflammation of the brain, I have no doubt, his pain, delirium, tendency to hold the head back, were all diagnostic.

**Treatment.**—His pulse indicated great weakness, and we in consequence resorted to stimulation. A wineglass of milk punch every four hours; an anodyne enema was also administered; whilst as a revulsive the whole head was blistered. Under the treatment he has rapidly improved.

It is remarkable that this is the fourth case within one month where a blister was imperatively demanded.

**Diabetes.**—The patient laboring under dia-

betes mellitus (see REPORTER, p. 158,) was again brought forward. He appeared to us somewhat improved.

The other day he declared an utter inability to eat meat. I then thought I would allow him some potatoes, as being both nutritive and anti-scorbutic, the yeast being continued. He apparently immediately improved, his urine being reduced to two quarts a day. My theory is that the yeast has enabled the potatoes to undergo all the necessary changes incidental to normal digestion. He soon became tired of the potatoes, when we substituted rice, and the urine very soon increased in amount: why, we cannot say, for we would expect the rice to undergo the same changes as the potatoes.

He now passes five quarts a day.

*Orchitis*—This patient about a month ago, suffered from an obstinate diarrhoea. The disease yielded to treatment, but a painful swelling of the testicle came on. This is, therefore, orchitis.

*Treatment*.—Leeches were freely applied, and then cooling applications, which were succeeded by the flaxseed poultice.

If in inflammation of the testicle you fear suppuration, do not apply poultices; for by their sedative influence they weaken the part, and hasten the suppurative action. He was also kept upon a low diet, and actively purged.

The organ is much diminished in size in comparison to what it was. As there is still hardness present, we order the part to be freely rubbed with the ointment of iod. of potas.

Service of Dr. Norris.

*Un-united fracture of the Humerus*.—The patient, a strong, healthy looking man of about forty, entered the hospital on the 24th Feb., of this year, in consequence of an ununited fracture of the middle of the humerus.

Upon the 25th of Nov. 1856, he was run over by a heavy cart, and received a compound comminuted fracture of the humerus.

In consequence of the severity of the injury, the arm was placed in a fracture box, and enveloped in bran.

The man asserts that during this treatment several pieces of dead bone came away. After about four weeks, splints were applied; but union of the fragments did not occur, and the poor fellow was informed that he had a false joint at the seat of the injury. Upon the sixth of March last, Dr. Peace performed Dr. Brainard's operation for ununited fracture. The

extremities of both fragments were drilled through a number of times, in the hope of exciting a sufficient degree of inflammation to produce exudation and the subsequent processes incidental to the healing of fractures.

During the operation it was noticed that the bone was softened, and in many places inclined to crumble very easily. For some days the case progressed very favorably, no pain or constitutional irritation: but he suddenly complained of great pain in the arm, and upon removing the dressings it was found much swollen by erysipalatus inflammation. We gave the tinc. of the chloride of iron, together with good diet, etc. His strength rapidly failed, and great apprehensions were entertained of the issue.

After a siege of twenty-two days he was pronounced free from danger, but the ununited fracture remained the same.

This man is again before us, asking us to do all for him that we can.

From a review of the history of the case, I am not inclined to anticipate much from any operation. At present we shall ascertain how far splints, serving the purpose of an artificial humerus, will enable him to recover the use of his arm.

WEDNESDAY, DECEMBER 8TH.

Service of Dr. Wood.

*Paralysis*.—A young girl with paralysis of sensation and motion in the lower extremities was brought before the class.

The question that at once occurs to us is, the cause of the paralysis. It is either cerebral or spinal disease that has occasioned the present condition of the patient.

If the primary disease is cerebral, we would expect, even if sensation in the limbs is annihilated, that upon tickling the soles of the feet the limbs would be drawn up. This movement, under the circumstances of the case, is a reflex movement, occurring under the nervous control of the spinal marrow. If, however, the spine is diseased, this reflex action will not occur.

In this case, upon tickling the soles of the feet, no reflex action occurs. We infer, therefore, that there is disease of the spinal cord. Our diagnosis is strengthened by the fact that the patient has had great pain in the back, increased by pressure.

There is here inflammation of the membranes of the spinal cord—serofulous, we infer, considering the age, complexion, etc., of the patient.

*Treatment.*—Obviously, leeches, cups, etc., to the part of the spine affected, whilst cod-liver oil, iron, etc., are given for their effect upon her constitution.

*Enteric Fever.*—A patient just entering the hospital, was brought into the amphitheatre.

Such a case is of great interest to the student; for he and the professor before him are upon the same footing, both seeing the patient for the first time.

Dr. Wood, without drawing a single inference from any of the answers to the questions given, suddenly addressed the class—

"Gentlemen, what disease have we here?"

"*Enteric Fever*," resounded throughout the room.

The man has been in bed for five days, but for some time has felt a general weakness and malaise; has looseness of the bowels. There is great dullness of mind. The face is dark, dusky, somewhat flushed; pulse not more than ninety; tongue dryish and covered by a whitish yellow fur; abdomen meteoric, and here and there rose-colored spots.

This man is probably in the 12th day of his sickness.

*Treatment:*—

R. Pil. hyd. gr. j.  
pulv. opii.  
" ipecac aa gr. 1-6. M.

To be given every two hours.

*Treatment of Chronic Rheumatism.*—A number of cases of this affection were shown; some of the cases having been of years' duration, with limbs swollen and joints distorted.

These cases, which are by many regarded as hopeless, are under treatment, improving. By this treatment, I would impress upon you, over and over again, have I relieved such cases of chronic rheumatism. When the disease is fixed permanently in one or a few parts, and does not change, I believe that it is kept in existence by local action only, and to overcome this abnormal local action, repeated *blistering* is incomparably superior to all other remedies. The part should be covered with the blister, and as quickly as one heals, it should be followed by another.

WEDNESDAY, DECEMBER 8TH.

Service of Dr. Norris.

*Wound of the Scalp.*—A man was brought before the class, having just received a severe blow upon the head. The scalp was much torn and bruised.

It is very important in these cases to examine if there is any fracture of the cranial arch; this examination should be made by the finger, not by a probe.

If there is a *depressed* fracture, it is, I think, safest to operate immediately, to elevate the depressed fragments, even if no signs of compression of the brain are present. In this case we have no fracture; the wound of the scalp is dressed with adhesive plaster. Never attempt to bring the cut edges of the scalp together by means of sutures; for you will almost invariably have erysipelas setting in.

*Fracture of the Skull in a Child.*—One of the most pitiable objects that we have ever seen was presented, in a little child about six years of age, that had been thrown down and trodden upon by a horse. The outline of the horse shoe was stamped into the flesh and bone of the child's head. There was a simple fracture of the os frontis, and along the arc of the wound, in many places, the bone was denuded of periosteum. The bone in several places was doomed to necrosis. To what depth the death of the bone will take place, we cannot say, but upon the greater or less depth hangs the child's life.

*Treatment.*—Obvious: where necessary, adhesive plaster, and over the whole, damp cloths.

A number of cases of injuries to the hands were presented.

In the treatment of all these injuries the surgery was eminently conservative.

The interesting case of severe gun shot wound of the wrist joint, previously reported, (see report of Nov. 6th, p. 129,) where an almost desperate attempt was made to avoid an operation, was brought before the class, with the gratifying information that the hand was saved.

## HOSPITAL OF THE UNIVERSITY OF PENNSYLVANIA.

WEDNESDAY, DECEMBER 15.

Service of Dr. Henry H. Smith.

*Cold Abscess of great size.*—A middle aged woman presented a huge tumor in the right thigh just below the groin. It was first noticed four months ago, being at that time about the size of the end of the thumb. It rapidly enlarged, and is now fully the size of the head of a child six years old. The skin over it is not discolored or congested, nor is it



adherent to the subcutaneous tissues. Careful examination readily detects a well marked sense of fluctuation. The case was, in all probability, one of *cold abscess*. Careful examination of the vertebral column had been instituted, and the condition of the hip-joint had been investigated. No morbid process had, however, been detected in these situations to account for the collection of pus. The abscess might perhaps be based upon disease of the lymphatic glands of the groin. No positive opinion would, however, be given, and the case would be reserved for further and more deliberate examination. This case was made the text of a series of remarks upon the difficulties in the diagnosis of tumors. Dr. Smith said that, he wished to impress upon the class, that any thing like accuracy of diagnosis in this class of affections could only be arrived at by the most thorough, careful and pains-taking investigation of each case. Those who trusted to what might be called their intuitive perceptions, and jumped at conclusions after the most superficial examination, might occasionally happen to guess correctly, but frequent failures could not fail to result.

He assured the class, that even after the most careful examination, in some cases, it was quite impossible to arrive at accurate conclusions until after the performance of an operation. The errors in diagnosis, which had been made by the most distinguished European surgeons, would justify this remark, and whoever engages largely in surgical practice would daily experience its truth.

SATURDAY, DEC. 18.

Service of Dr. Henry H. Smith.

*Soft Cataract.—Operation.*—A young man, laboring under a well marked soft cataract of the right eye, was brought forward to be relieved by an operation, which was performed by Dr. Agnew at the request of Dr. Smith. The operation of *absorption* was selected by him, because the cataract was evidently very soft. Dr. Agnew said that care was requisite in selecting the point at which the cataract needle was to be introduced. The proper spot was just behind the junction of the cornea with the sclerotic coat, the needle could then be carried behind the iris into the posterior chamber of the aqueous humor. Should it be introduced anteriorly to this, there was danger of wounding the iris; should it be introduced at a spot too far back, there was danger of wounding the ciliary processes. The needle

being carried in far enough to be visible through the pupil (which should be dilated by the application to the lids and brows of soft extract of belladonna previously to the operation) should be inclined backward, and made to lacerate the capsule and break up the lens. The capsule lacerated, the aqueous humor comes in contact with the lens, upon which it exercises a solvent action. The lens ultimately disappears, and the rays of light are again enabled to infringe upon the retina. The patient is thus cured as far as he can be, but is ever after obliged to wear a convex glass, (cataract glass,) in order to obtain distinct vision.

The importance of proper *preparatory* measures and of judicious *after-treatment*, was insisted upon at large, and the operation having been performed, the patient was handed over to his family physician, who kindly undertook the charge.

As the cataract in this case affected the *right eye*, Dr. Agnew, (who is completely ambidextrous) handled the needle with the *left hand*. *Ambidexterity* cannot be too carefully cultivated by those who would ensure surgical success.

*Papillary growth on fore-arm.—Excision.*

—An old lady presented a florid excrescence on the right forearm. It was oval in shape, about the size of a quarter of a dollar at its base, and rather larger at the summit, being three-fourths of an inch in height. The growth had been formerly shaved off, but had recurred after the operation. Dr. Agnew said that it consisted probably of hypertrophied cutaneous papillæ, and, the patient being etherized, he proceeded to remove it by two elliptical incisions, including, with the growth, some of the surrounding healthy skin, which with the subcutaneous fat was dissected away down to the deep fascia of the forearm. A ligature having been applied to a small vessel which bled freely, the edges of the wound were brought together by three hare-lip pins, supported by adhesive strips, and dressed with a cerate cloth, compress and bandage.

*Cold Abscess in the Buttock.—Evacuation.*

—A little girl was brought forward by Dr. Smith, who had a large chronic abscess in the right buttock. This patient has been under treatment at the University for a short time, for antero-posterior curvature of the spine. A careful examination has not detected any hip-joint disease, and there was no positive evidence that the abscess was connected with the

spinal disease. But although it was not in the position in which we would expect to find it, if such were the case, this possibility must not be overlooked. At one or two small points there was a degree of redness and tenderness, which renders it probable that if the abscess was left to nature it would evacuate itself spontaneously in a few days.

As in this case several fistulous orifices would probably be made, it was best to anticipate the natural process by making a valvular opening with a narrow bladed bistoury, and thus evacuating the fluid contents.

This was accordingly done, and more than half a pint of pus was discharged. The small wound was then closed by a strip of adhesive plaster, supported by a compress and bandage.

*Oonychias.*—*Extirpation of the Nail.*—Dr. Smith next presented a boy about 7 years old, laboring under well marked onychia of the middle finger of the right hand. The case was of more than four months standing, and had resulted from an injury.

The child being etherized, Dr. Smith removed the diseased nail, and cauterized its matrix thoroughly with nitrate of silver. The finger was then covered with a piece of lint, spread with cerate, which was retained by a finger bandage, and would be poulticed after the child returned home, after the inflammatory action developed by the operation, had been subdued, lateral pressure, with adhesive strips would be employed to complete the cure.

## HOSPITAL OF THE JEFFERSON MEDICAL COLLEGE.

WEDNESDAY, DECEMBER 15.

Service of Dr. Dickson.

*Chronic Erythema.*—Barney B. was put on the use of the liquor potassæ arsenitis several weeks ago, having presented himself at that time, suffering from chronic erythema, which supervened upon exposure to great heat. At first it assumed an erysipelatous appearance, and the skin became roughened and indurated. It is in these chronic cutaneous diseases, which seem stereotyped on the patient, that arsenic is often a valuable agent. In a protracted case of measles, the eruption of which lasted for eighteen months, the arsenical solution was employed with marked ad-

vantage. The treatment must be continued, and oleum morrhuæ be added to it. Cod-liver oil, employed in cutaneous affections, both externally and internally, is productive of decided benefit. In this instance, it will be prescribed internally only.

*Cramp depending upon Muscular Exertion.*—Hugh D., aged 48, had suffered for a long time from cramp in the leg, the pain not being constant. His occupation is weaving, and he is obliged to use his legs very much. The pain never recurs except after fatigue, or at the end of the day after working at the treadle in weaving. The cramps are evidently produced by muscular exertion, and such cases may often be relieved by the pressure of a bandage carried up to the knee. Sometimes the active use of a muscle at a distance from the seat of cramp, may exert a sort of revulsion by calling off, as it were, the nervous concentration from the part affected. The old superstitions in regard to the cure of cramps by an eel-skin applied around the leg, or by a roll of sulphur worked violently in the hand, may be explained in this way. The patient must take no medicine, and must lie on his side in bed, with his legs drawn up. Frictions sometimes afford relief, but the bandage alone will probably be of much service.

SATURDAY, DECEMBER 18TH.

*Periodical Chills and Headache.*—Jane B., aged 35, has had chills recurring regularly every day; sometimes in the morning; at other times in the afternoon, occasionally accompanied with fever. Pain is experienced about noon over the forehead, the headache being frequently associated with nausea. The tongue is enlarged, soft and swollen, a condition indicating great disorder of the gastric secretions. Usually, the latter are in increased quantities, and when, in this case, vomiting takes place, a sour liquid is thrown up. The bowels are occasionally constipated. A mercurial cathartic will be the best form of purgative medicine to employ, together with some preparation of cinchona, as periodicity is strongly marked in the regularity of the chill. Disease of opposite and unconnected character, into which periodicity enters, as a prominent characteristic, seem to yield to the antiperiodic powers of quinia. The preparations of cinchona have been employed in almost all nervous affections, but in some, as epilepsy, they seem to have failed to exert any beneficial agency. By breaking in upon the chain of morbid phe-

nomena, we can frequently give nature a new foothold, and destroy the disease.

R. Quinæ sulphatis gr. ij.

To be taken three times daily.

R. Pilul. hydrargyri gr. v.

To be taken to-night.

Neuralgia has so often been controlled by cinchona, that it has been considered by some writers to be a malarious affection. But it is not necessary to adopt any such hypothesis, for its action here is not at all more obscure than in malarial fevers.

*Headache, with Nausea, &c.*—Mary J., aged 42 years, has had for a long time violent pain at the top of the head. The pain is very severe in some cases at the vertex, and very circumscribed. Vomiting relieved her, but she suffered from nausea and constipation. The tongue does not indicate any morbid condition of the stomach. Headaches of old age are very difficult to cure. Purgation and a tonic treatment must be employed.

R. Ferri sulphatis gr. ij.

Rhei. pulv. gr. iij.

Aloes, gr. j.

M.

Three of these powders must be taken a day, unless the cathartic action should be too decided.

*Other Cases Presented.*—Cases of chronic pneumonia, influenza, vertigo with anæmia, chronic laryngitis with pharyngitis, lumbago, and intermittent fever without enlargement of the spleen were also brought before the class. Several of these have been previously described.

WEDNESDAY, DECEMBER 15.

Service of Dr. Gross:

*Caries of the Tibia.*—Robert H., aged 8 years, has had for three months an inflammation of the calf of the leg, apparently of an erysipelatous character. Matter has formed and been discharged, the openings being still visible. The appearance of the limb indicates the existence of disease of the bone. The discharge through the cloacæ is of an unhealthy character. The rule in regard to the removal of dead bone is, that we must wait until the pieces are sufficiently detached. When the proper time arrives, the cloacæ must be connected by an incision, and the detached piece removed by forceps, chisel, etc. The probe, when introduced through one of these openings, grated on a rough surface,

showing the periosteum to be destroyed over a large extent of the bone. There is more of caries than necrosis in the present instance. Of the distinctive characteristics of the two affections we shall hereafter speak. The patient being chloroformed, small superficial pieces of bone were removed, larger portions not being sufficiently detached to justify removal *en masse*.

*Dislocation of the Thumb.*—Neil McK., 24 years of age, in a fight, four months ago, dislocated the metacarpal bone of the thumb backwards upon the dorsal surface of the trapezium. Shortening was the result, with inclination of the thumb towards the palm of the hand. The luxation was reduced at the time, but the use of the thumb was materially impaired. A grating sensation exists upon motion, but this arises from the deposition of lymph around the joint. It is a plastic crepitation, as in inflammation of articulating surfaces, synovial bursæ, etc., and differs from that rough, distinct sensation after fracture of bones.

The hot douche followed by the cold, friction with spirits of camphor, turpentine, or soap liniment, and gradual, easy motion, to prevent ankylosis, should be perseveringly employed.

*Other cases presented.*—Several other cases, some of them exhibiting the results of former treatment, were brought before the class; such as hydrocele, and the method for its permanent relief; inguinal hernia, to exhibit the proper way of wearing a truss; transverse fracture of the patella, followed, apparently, by bony union, although the connection formed between the fragments is generally fibro-cartilaginous, &c.

SATURDAY, DEC. 18.

*Granular Conjunctivitis.*—A woman, — years of age, has suffered from inflammation of the eyes for three months. No cause is assigned by the patient. The left eye especially is painful, and the eyelids are found in the morning adherent by a thick, copious secretion. She has dimness of vision and photophobia. The eyes do not water much, but smart in the evening. The pain is deep-seated in the ball of the eye, and at night frequently prevents her from sleeping. The eyelids are very red, and their surface is covered with granulations, similar to those of healing ulcers. The case is one of granular

conjunctivitis, not at all an unfrequent affection, and in many parts of the United States, especially along the western water-courses, often epidemic. The granulations are the natural papillæ hypertrophied, a consequence of inflammation. These irritate the ball of the eye, and render the cornea opaque. The latter frequently sloughs, and the delicate structures of the eye suffer morbid changes from the pressure of the granulations. The discharge is always viscid and agglutinating. Pain often extends over the forehead, temples and cheek, and hemicrania follows in many cases, the scalp being very sensitive to atmospheric changes and external pressure.

The difficulty in treating these cases is to keep the surfaces apart. Rapid cures may often be effected, if perfect separation is practicable. Generally the progress towards a cure is tedious, and the patient must be forewarned in regard to it. The bowels must be attended to, a saline and antimonial treatment be adopted, and if a rheumatic diathesis exists, as in the present case, colchicum must be administered. The local applications are as follows: Sulphate of copper in stick, freely used; the redundancy of the salt being washed away with a sponge and water squeezed over the eye. The copper will be diffused over the ball and lids, if applied to one lid only.

*In consequence of the crowded state of our columns, we are compelled to withhold a portion of these reports till our next issue.—Eds.*

## HOSPITAL OF PHILADELPHIA MEDICAL COLLEGE.

TUESDAY, DEC. 7.

Service of Dr. Halsey.

*Herpes*—A child 8 years of age has herpes labialis affecting nearly the whole of the upper lip and side of the cheek. This is a very common affection among children who eat a large amount of animal food, particularly salt meat. It occurs, also, from the effects of cold, and frequently at the breaking up of fevers. Treated by salines and alkaline washes.

R. Carb. soda,  $\mathfrak{zj}$ . to  $\mathfrak{f}\mathfrak{z}\mathfrak{j}$ . of water. Take a teaspoonful three times a day. Also, liquor sodæ chlorinatæ,  $\mathfrak{f}\mathfrak{z}\mathfrak{ss}$ . to water  $\mathfrak{z}\mathfrak{j}$ . Use as a wash.

*Compound Wound of a Joint.*—A laborer having injured the second phalangeal joint of his little finger, was introduced. The whole extent of the joint was opened, and suppurating freely. Two weeks ago a board had fallen on it, and produced the injury. On account of a severe injury the patient received several years ago, this little finger became ankylosed at the first phalangeal joint, and the other fingers were much contracted. Amputation of the injured finger above the metacarpo-phalangeal joint was performed.

*Follicular Inflammation of the Fauces.*—The patient, a female, aged 28, has had a sore throat, more or less, for several years. On every occasion that she takes cold, or suffers the least exposure, her throat becomes inflamed. She has frequently a cough, which is occasioned by the feeling as if there was a small hair or sharp briar irritating or sticking in her throat.

Upon examination, the fauces are found to be very red, the mucous membrane studded with little eminences, which are the inflamed follicles, and the blood-vessels are seen very considerably enlarged, and coursing in every direction in the diseased parts. The tonsils are also found most generally to be more or less increased in size, and their surfaces covered with enlarged follicles, some of which are sometimes filled with inspissated mucus. The uvula and palate are nearly always inflamed, and the former very much elongated. When this condition becomes permanent, as it frequently does, it is necessary to remove the excess of length. Although there is nothing in the nature of this disease which is likely to prove very serious, yet it is exceedingly annoying to the patient from its persistency, and the little effect common remedies, or the ones generally used to treat sore throats, have upon it.

The best treatment, and almost the only one that proves successful in curing this complaint, is to swab the parts with a strong solution of nitrate of silver, from  $\mathfrak{zj}$ .— $\mathfrak{z}\mathfrak{i}\mathfrak{j}$  to  $\mathfrak{f}\mathfrak{z}\mathfrak{j}$ . of water. This is best done by a sponge probang. The application should be made two or three times a week. Frequently two or three applications made in this manner will cure a disease that has been standing for several years, and resisted every other means of treatment.

*A portion of this report is necessarily laid over till next week.—Eds.*



## Reviews and Book Notices.

A TREATISE ON FRACTURES. By J. F. MALGAIGNE, Chirurgien, de l'Hôpital Saint-Louis, Chevalier de la légion d'Honneur et du Mérite Militaire de Pologne, Membre de l'Académie de Médecine. With one hundred and six illustrations. Translated from the French by John H. Packard, M. D. Philadelphia: J. B. Lippincott & Co. 1859.

It is remarkable that our own surgical literature has not produced a systematic treatise on fractures.

Considering the attention which American surgeons have given to the subject, the acknowledged mechanical and inventive character of our countrymen and its results in effectively improving the mechanism of fracture treatment, we cannot but admit that there is a void left by our surgical writers, and which we think is not likely to be well supplied by any foreign author.

The subject of fractures, although rated opprobriously as *minor surgery*, we consider of major import to every practitioner. Their treatment can never become in this country the peculiar domain of the surgical specialist, and the increasing causes of the injury from the multiplying uses of machinery and other agencies, make a knowledge of the subject indispensable to the whole medical community. As a field for research and experiment, there is none in which labor may still be more profitably expended, for the pathology of many fractures is still obscure, and the method of treatment anything but satisfactorily defined.

For Anglicizing and Americanizing the present volume, the profession in this country will, we think, acknowledge an indebtedness to the intelligent translator, and of the manner in which he has accomplished the task we have little but in commendation to say.

The original "Treatise on Fractures and Dislocations, by J. F. Malgaigne," in two volumes, of which the present translation on fractures is the first, appeared in Paris in 1847, accompanied with an atlas of lithographic drawings. It is the only systematic treatise on the subject in the French language, and is the standard authority and text-book.

The text has been fairly rendered by the translator with as strict adherence to the original as idiomatic peculiarity will allow. His additions to the work are generally in the form of notes referring to cisatlantic views and practice. They are numerous and practical, and the relations of cases which have generally oc-

curred in the Pennsylvania Hospital are brief and to the point. There is also added an index, and a list of the literature of the subject.

The work has been thoroughly translated, leaving fewer passages to affectedly stand in the original than is frequently, but we think with impropriety, done. We do not believe that the paucity of the English language for expression will prevent a comprehensible rendering of any of an author's statements, and think that a translation should be a complete *interpretation*. With the exception of the occasional occurrence of the French expressions for weights and measures, for an understanding of which the translator troubles the reader to refer to a table of English equivalents, and a few passages which he charitably translates at the margin for those uninitiated in Gallic lore, this volume has little in that regard to be complained of.

The beautiful large lithographic drawings which accompany the French work in an atlas, appear as cuts appended to the end of the present volume, and have necessarily suffered severely by the reduction. The abrupt lines of the wood cut make a poor imitation of the delicate shadings of the lithograph. Some of the cuts are for this reason incomprehensible or incorrect, as figures 13 and 14—the latter of which looks like a *partial fracture*—and all on plate 8.

The illustrations, the translator says, are "for *greater facility of reference* collected at the end of the volume instead of being interspersed throughout the text."

In this we think his readers will not agree with him, as it is certainly more convenient to have them, to use a fracture term, in "apposition" with the matter to be illustrated.

The facilities for illustration afforded by modern improvements in the graphic arts should induce the public to require all works on practical subjects to be thoroughly illustrated. In this work the illustrations are only of the pathology of fracture, and with the exception of two engravings, one of which is introduced by the translator, the treatment of fractures, apparatus, &c., are entirely without illustration. It is impossible to make fracture apparatus and dressings intelligible to a reader without drawings.

We notice in this book, as in many others, the absurd and monotonous repetition of its title at the top of every page, instead of giving the subject treated of, or at least the heading of the chapter.

The book is in the usual good style of the



enterprising publishers, and we recommend it to the physician and student as the most comprehensive, systematic, and practical treatise on the subject in the language. L.

## Editorial.

### MEDICAL SERVICE IN THE NAVY.

The Hon. Isaac Toucey, Secretary of the Navy, in his Annual Report for 1858, states that the present effective strength of the medical corps of the navy does not exceed 59 surgeons and 70 assistant surgeons. "The wants of the service for the ensuing year [1859] will require for duty at sea, 39 surgeons and 70 assistants; for shore duty 26 surgeons and 17 assistants; making a total of 65 surgeons and 87 assistants, required for active duty. This deficiency in the medical corps of the navy cannot be neglected without subjecting the lives of those engaged in this branch of the public service to unreasonable and culpable exposure."

The aggregate number of medical officers required for active duty is 152; but the aggregate number now in the navy is 149, and of these at least 20 are incapacitated for active service.

In the year 1815, the aggregate number of medical officers was 120. Since that time the number of captains has been increased from 32 to 76; of commanders from 18 to 106; of lieutenants from 140 to 327; but the medical corps has been increased from 120 only to 149.

For these reasons, among others, the Secretary recommends Congress to make an addition of 20 surgeons and 20 assistants to the medical corps of the navy. "With that number the stations on shore and vessels at sea may be supplied, and a short interval of relief from duty allowed an officer on his return from a cruise."

To supply the deficiencies arising from deaths and resignations, the appointments have been from 6 to 8 yearly. But if Congress should increase the medical corps in accordance with the recommendation of the Secretary of the Navy, it is probable that

about fifty young gentlemen will be appointed to meet the demands of the service during the year 1859. Candidates for admission into the medical corps of the navy will not often find a more favorable opportunity. It is presumable, therefore, that a considerable number of the students now preparing in the several colleges of this and other cities, to graduate next spring, will apply to the Secretary of the Navy for permission to be examined by the Board of Naval Surgeons, which is usually convened about the close of the lecture season, to select persons suitable for the office of assistant surgeon in the navy. It is understood that the Board selects the number required for the year, from those examined. The places are put up for competition, and are given to those best qualified in all respects; but no one can incur the odium that is supposed to attach to an absolute rejection, though he may feel a little chagrined to find that his competitors have been more successful than himself.

The government seeks to employ in the medical department of the army and navy only those who are properly qualified to practice medicine and surgery advantageously to the thousands of our fellow citizens, soldiers and sailors, officers and privates, engaged in its military service, whose lives are frequently contingent upon the professional knowledge and judgment of their medical advisers. Without the chance of consultation with experienced practitioners, the assistant surgeon may be required, immediately after appointment, to operate, to dress wounds, and prescribe for the sick. Responsibilities, anxieties and labor belong to the position.

The qualifications necessary to fill the office in the navy are vigorous health, a sound condition of all the senses, an orderly, quick intellect, and integrity of moral character. The age of the candidate must not exceed twenty-five years.

The young medical officer is required to keep a professional journal, a register of the names, etc., of patients treated, a record of expenses incurred on their account, and to prepare from these periodically, reports in tabular form, for the information of the gov-

ernment. For this reason, it is very desirable that he should be able to write English correctly, legibly and readily, and understand very accurately the primary rules of arithmetic and the statement of ordinary accounts.

As he is often under the necessity of putting up his own prescriptions, he is expected to be familiar with the physical properties of drugs in common use, and the methods of weighing, measuring and compounding them accurately, as well as with the modes of preparing articles of diet for the sick. Indeed, the young officer will speedily discover on board of a ship of war that he has more frequent occasion to exercise his knowledge of materia medica, pharmacy and therapeutics—to use measure-glass, scales, pestle and mortar, and spatula—than the trephine or amputating knife. The necessity for abstracting teeth, or the abstraction of blood by lancet or cups, or the preparation of cataplasms, daily occurs. Such details of practice as are left, especially in cities, to experienced nurses or to others, demand on board of ship the supervision, at least, of the medical officer himself; and therefore it is peculiarly proper that he should be acquainted with these seemingly little things, on assuming the duties of his office.

Candidates are expected to evince a fair knowledge of the elementary and general principles of chemistry, of physiology, of general and surgical anatomy, of medical jurisprudence, of the principles and practice of surgery and medicine, and of obstetrics, as taught in the schools. Upon all of these points, it is understood, the examinations are minute, and as far as possible, practical. The candidate is afforded opportunities to distinguish drugs, to compound prescriptions, to diagnose diseases at the bedside, to apply surgical dressings and apparatus, and to operate on the cadaver in the presence of the examiners: and, as the examination is partly by writing, partly oral and partly practical, he is thus enabled to exhibit fairly to what degree he is prepared to enter immediately on the active duties of the profession.

All the qualifications which are befitting to

a Christian gentleman in any condition of life, are becoming to the medical officer of the army or navy. Collateral sciences and the languages, modern and ancient, *are not essential* to successful competition for the office of assistant surgeon in the navy; but as the possession of this kind of knowledge is indicative, to some degree at least, of industry and mental habit and capacity, they are considered in the classification of those selected for appointment—the most accomplished in the estimation of the Board, being placed highest on the list. But without an adequate knowledge of the principles of his profession, and aptitude in their application, mere accomplishments in the physician, are regarded to be of little value.

#### CRIMINAL AND OBSCENE QUACK LITERATURE.

It is high time that the laws of the land against the publication of obscene works was enforced against a class of quack productions with which our community is flooded, and which has found its way into the columns of our newspapers in the form of advertisements. In many of our cheap daily and weekly newspapers, may be found advertisements of books, addressed especially to females, which—we speak advisedly—are quite as much calculated to corrupt the morals of the young of both sexes, as are any of the acknowledged, and too well known, obscene publications, against the circulation of which stringent laws are passed—though we fear but seldom executed. We remember on one occasion to have found, nicely tucked away in the dish closet of a most respectable married lady, a work which she had obtained in reply to one of these specious quack advertisements, a book which we know she would have been ashamed to have had her husband discover her perusing. And it is not married ladies alone that procure and read these works, as many a physician has probably the opportunity of discovering. A prurient curiosity

leads many a young woman to reply to these advertisements, and procure works which "open the eyes" of the possessor of them.

But books are not the only objectionable form in which indecent quack literature meets the eyes of the female sex. The mails are burdened with circulars, and the family newspaper with open, undisguised advertisements of obscene character AND CRIMINAL INTENT. We appeal to the record.

We have before us a circular which has come into our possession, which enters into a long and labored disquisition on the virtues of a medicine the intent of which is to *prevent pregnancy*! The wife is informed that she can use the medicine without the knowledge of her husband or most intimate friends, and by inference at least, the unmarried, that she may indulge in the most unbounded licentiousness without being detected, provided only she has this medicine at hand—thus attempting to defraud the husband of his offspring, and to demoralize young women.

But these circulars are *secret* missives, and their influence is somewhat limited. There is another class of immoral and indecent publications found in advertisements in the family newspaper, and even the *religious* press of the country is not entirely free from the contamination. We have before us a weekly newspaper published in one of the "most straightest" of the New England States, in which may be counted *twenty-eight* different quack advertisements, (not including hair tonics,) occupying *nearly half* of the advertising department of the paper, and comprising nearly one-fourth of its whole contents! *Ten* of these advertisements are embellished with cuts, several of which are supposed to represent the "wondrous wise" head which originated the nostrum advertised. *Fifteen*, that is more than half of these advertisements, are especially addressed to those having "*secret diseases*," and to females, and *THREE* of them hold out the caution (the *intent* is perfectly transparent!) that

married ladies should not use at all, or at least during the three first months of pregnancy, the nostrum advertised; while a *FOURTH* unblushingly offers to send for three dollars "*the only safe and sure preventive from pregnancy*." Several of the advertisers proffer private treatises on disease, embellished with from one to two hundred plates, some of them colored!


In conclusion, and without any further comment, we copy, as nearly as we can, one of the advertisements, as a type of the rest, omitting name and address. We choose this for its brevity.

#### DR. A BOOK FOR EVERYBODY. STARTLING DISCLOSURES!

(A cut representing a bearded man in private consultation with a young female, who is secretly (decency died.) DR. ———'s great work for the married, or those contemplating marriage, 200 pages, full of

PLATES.

Price twenty five cents—sent to all parts under seal by mail. POST-PAID. 50,000 copies sold the past year. The single married, and the married happy. A lecture on LOVE, or how to choose a partner, a complete work on midwifery. It contains hundreds of secrets never before published—warranted to be worth three times the amount asked for it, 25 cents in specie or postage stamps, enclosed, will secure a copy by return mail. Address ———, M. D.

 DR. ———'s FEMALE PILLS, one dollar a box, with full directions. Married ladies should not use them. Sent by mail. Address Dr. ———, as above.

#### PROFESSOR DICKSON.

It must not be understood from the notice in our last of Dr. S. H. Dickson's declining to serve as one of the Consulting Physicians at the Philadelphia Hospital, "on account of ill health," that his health is in any degree failing. On the contrary, we are glad to be able to announce that the doctor's health is as good now as it ever was. But while his physical ability is ample for the performance of his present duties, he was unwilling to add to them the burdens incident to the post in question, and therefore declined the office.

M. GROUX.—This intelligent gentleman, who has a congenital defect of the sternum, exposing the movements of the heart and lungs, and who has for several years been engaged in exhibiting to the profession the actions of these organs, will visit Philadelphia, we understand, some time during the coming month. This remarkable case cannot fail to attract the attention of the profession.

## Periscope.

*Iridektomia for Chronic Iritis and Chorooido-iritis:* By A. v GRAEFE.<sup>1</sup> *Archive of Ophthalmology*, II. 2, p. 202.—While hitherto the operation of excising a portion of the Iris has been made for the formation of an artificial pupil in order to procure a passage of the rays of light to the interior of the eye if the normal aperture was closed, Graefe has extended the operation to cases where complete occlusion of the pupil existed, with the most satisfactory result.

Complete occlusion of the pupil, i. e., extensive posterior synechia, is the real cause of the frequent recurring iritis, to which chorooiditis generally supervenes, from which a more or less amblyopic condition arises. It has been customary to ascribe iritis because of its obstinacy and fatal consequences to various constitutional diseases. Graefe shows, however, in his treatise on the subject, that extensive posterior synechia maintains a continued stasis in the iris and the equatorial zone of the choroidea, in consequence of which, ridgey projection in the iris, opacity of the vitreous humor and partial separation of the retina, and atrophy of the bulbus ensue.

True, iridektomia does not utterly remove the synechia, but it relieves the tension of the fibres, the cause of constant irritation. Graefe found in most cases the globular projection of the iris to disappear after the operation, as also the pyæmia and exudation, and patient gradually recovered sight. He cites one case particularly, having already given the patient a certificate that he was incurably blind, his pupil being completely occluded, when behold he essayed the operation, and succeeded so far that he can now read print in large letters.

Patients operated on for complete occlusion without opacity of the cornea, of course see through the natural pupil. Should cataract follow, it has to be extracted, as reclinatio or discision would not be advisable in such cases. He had to repeat the operation on some individuals, but never failed in one. Encouraged by the success he had experienced in cases of this category, he made it available in the following disorders of the eye, with almost as favorable results.

I. For the sequelæ of *iritis serosa*, characterised by softening of the vitreous humors, quivering of the lens and iris.

II. *Central abscess of the cornea* with sinking of pus or hyopion, to shorten the process.

III. Swelling of the lens by mechanical injuries.

IV. Small foreign substances in the iris, if the inflammation does not speedily subside. (The portion containing the foreign substance being excised.)

V. Chronic iritis of the utterly blind eye, to save its fellow.

VI. *Glaucoma*. According to Graefe's hypothesis, which seems to be confirmed by the favorable result of the operation on these cases, Glaucoma arises secondarily by an intraocular pressure, from a congested and infiltrated iris and choroidea.

He advises not to lose time with the constitutional treatment, but treat it locally as a local disease. He operates despite of existing *neurosa ciliaria*, chemosis and intolerance of light. The pain experienced before the operation ceases after it, as with a sudden stroke.

---

*Phalloplasty:* By DR. SPRENGLER. *Bayonne Med. Intelligenz*. 2, 1858.—This operation, the first ever performed, and crowned with perfect success, consisted in the conversion of integuments adjacent to the penis, to a covering of the same, of which it was deprived by traumatic influence. A laborer, 33 years old, had the misfortune to be seized by the wheel of a factory machine, which tearing his pantaloons, also denuded his penis from the root to the glans, and besides, caused a longitudinal wound of the right side of the scrotum. On arrival of the patient in the hospital, the scrotal wound received three sutures, and the penis was covered with cerate compresses and cold fomentations applied. On closer examination, the inner lamella of the prepuce was found intact, as also a small portion near the scrotum, to which Dr. Sprengler thought to attach integument from the adjacent regions, as without a plastic operation the cicatrices would have produced shortening and curvatures of the penis, and loss of the *facultas cœundi*. Dr. Sprengler determined on an operation, for which he made the intact portion of the prepuce and scrotum available, filling out the insufficiency of these resources by integument of the regio pubis. Chloroform being administered, the prepuce was slit into two flaps, and reverted to the extent of 1½". As this left the bare interstices anteriorly and posteriorly, the scrotal debris was

<sup>1</sup> Translated for the MEDICAL AND SURGICAL REPORTER, by G. Bachman, M. D.



drawn forward to fill the former, and the regio pubis furnished the supply for the latter. The three flaps were united by eleven sutures. On the third day the scrotal portion of the new covering showed some gangrenous spots, on account of which aq. chlorata was added to the cold fomentations. On the fourth day the sutures of this portion gave way, requiring the application of some renewed sutures.

The preputial portion retracted very little, and granulated finely, while the pubic portion retracted much, and yielded little advantage to the result. In five weeks time the wound was cicatrized, leaving no deformity nor disability of the organ.

*Iodide of Potassa—An Antigalactic:* By PROF. ROUSSET. (Journ. de Bord. May, 1858.)—The enlargement of the galactophorous tubes, so often occurring during early lactation, frequently induces fever, inflammation and abscesses of the mammae, which indicate therapeutical treatment, for the purpose of diminishing the lacteal secretion. As the remedies usually resorted to seldom accomplish the desired effect speedily, Prof. Rousset gave iodide potassium with favorable effects, in all instances hitherto experimented on. He observed the secretion of the milk to decrease considerably, more especially if the child was not put to the breast. The milk returns if the remedy has not been used for more than two or three days. The effect is more decided if not more than 40 or 50 centigrammes are given daily. The lacteal secretion can be entirely suppressed if the remedy is administered one or two days after delivery.

*Gangrene cured by the use of Pyroligneous Acid.*—In the *N. A. Med. Chirurg. Rev.*, we find the report of a case of gangrene, cured by the employment of the pyroligneous acid, by Dr. A. Lopez, of Mobile, Ala. The patient had sphacelation of the entire hand from the tips of the fingers to the wrist, with enormous swelling, the result of a mal-treated phlegmonous abscess. At first he used carrot, yeast and bark poultices, with nitric acid washes and other remedies, with some benefit; but this not being satisfactory, Dr. L. applied a solution of one part of pyroligneous acid and three parts water, by means of cloths. In less than twenty-four hours the intolerable felon was removed, and a manifest improvement presented in the appearance of the wound. Sloughing was completed, and finally a perfect cure was the result. He has since employed it with equal satisfaction.

## Medical News.

### MARRIAGES.

DOWLING—RUSSELL.—Dec. 14th, at Warrensburgh, N. Y., by Rev. Dr. Dowling, John W. Dowling, M. D., of New York city, (son of the officiating clergyman,) to Miss Minerva, daughter of Hon. Joseph Russell, of the former place.

FANNING—BURBANK.—Dec. 8th, at Bethel, Me., Miss Isabella G., youngest daughter of Dr. Joshua Fanning, to A. L. Burbank, Esq., all of Bethel.

HARDWICK—STADLEMAN.—On the 25th of November, by the Rev. Luther E. Albert, Dr. John R. Hardwick, of New Albany, Georgia, to Miss Louisa Stadleman, of Germantown.

NICHOLLS—GARBER.—Dec. 9th, in this city, by Rev. D. A. Nicholls, Dr. Phineas P. Nicholls, of Cold Water, Mich., to Miss Salie Garber, of this city.

### DEATHS.

TAYLOR.—In New Alexandria, Pa., on the 13th of November, Mrs. Catharine R., wife of Dr. G. W. Taylor, aged 35 years.

WOODLAND.—In Sacramento, Cal., on the 17th ult., Mrs. Maria J., wife of Dr. Thomas W. Woodland, and daughter of Isaac Myer, Esq., of this city.

MARRIAGES OF CONSANGUINITY.—Dr. S. M. Bemiss, in his able report on this subject to the American Medical Association, at its meeting in Washington, last May, says that over ten per cent. of the deaf and dumb, over five per cent. of the blind, and near fifteen per cent. of the idiotic in our State institutions, subjects of these defects, are the offspring of kindred parents.

Such facts would seem to justify the Legislature of Georgia in having recently passed a bill prohibiting the marriage of first cousins, under heavy penalties, one of which is cutting off the issue from inheritance.

✂ We learn from the *Lancet* and *Observer* that the arrant quackery of the Cincinnati "Electics" is growing more and more apparent.

✂ Dr. Mendenhall has retired from his connection with the Cincinnati *Lancet* and *Observer*, leaving it in charge of Drs. Murphy and Stevens.

TO CORRESPONDENTS.—We have received the following publications from the publishers, Messrs Lea & Blanchard:

1. Erichsen's Science and Art of Surgery.
2. Condie on Diseases of Children, a new edition.
3. Hunter and Ricord on Venereal, by Bumstead.

Also, the following:—

The Physician's Hand Book of Practice and Pocket Memorandum for 1859, by Dr. Wm. Elmer.

The Physician's Visiting List, from C. J. Price & Co.

The Dental Register of the West, in Exchange.

Our Medical Colleges. An introductory lecture to the course of 1858-9, in the Medical Department of the University of Nashville. By J. Berrien Linsley, Chancellor of the University. From the author.

On Vesico Vaginal Fistula, and its Successful Treatment. Illustrated by eleven cases. Read before the British Medical Association, at Edinburgh, July 31, 1858. By I. Baker Brown. F. R. C. S., etc., etc. From the author.



## HOW OUR WEEKLY IS RECEIVED.

### EXTRACTS FROM CORRESPONDENCE.

"I am extremely happy that you have effected the change in your—our—periodical. (for you are not the only owner of it,) from a Monthly to a Weekly. I was going to subscribe to the *Boston Medical and Surgical Journal* at the commencement of the coming year, in order to supply a want I had often felt; but as the *REPORTER* has the advantage in point of location, and having the interest of the profession at heart, I shall cheerfully support it, and welcome it as I have heretofore done, as the most pleasant face to my table."

Abingdon, Ill., Oct. 14th, 1858.

"Please send me half a dozen copies of your 'Student's Number,' and I will try what I can do with brethren by way of subscription. I like the plan, and hope the weekly may succeed."

Hagerstown, Ind., Oct. 8th, 1858.

"I am much pleased with the new form in which the *REPORTER* has appeared. I shall now read it more thoroughly than I have done heretofore, for the reason that it is more convenient for me to peruse a short weekly number than a large one at longer intervals."

New Haven, Conn., Oct. 12th, 1858.

If No. 7 of the "Medical and Surgical Reporter is really a specimen of what the journal is, and will be, it certainly is the most valuable medical journal to the *Practising Physician* published, and must necessarily, when known, attain an extensive circulation. Its articles are short, practical, and from the lips of practical men—above all things, exclude from its columns those lengthy "Book Notices," "Reviews," "Bibliographical Notices," and lengthy "Theoretical Essays," written by "theoretical physicians," which fill the pages of all our celebrated quarterly journals, for practicing physicians have not time to read them. Let us have one practical medical journal in our country, such a one as No. 7 of the "Medical and Surgical Reporter." Your "Illustrations of Hospital Practice" is what I have long been hoping to find in some of our medical journals, and is what country physicians have long desired.

Riversburg, Penna., Nov. 22d, 1858.

\* \* \* You have my best wishes that not only its success as a scientific journal, but also that a liberal reward may attend your praiseworthy efforts to maintain a high code of Ethics, and to diffuse among the members of the profession those details of clinical medicine and other matters of note in the Philadelphia Hospitals, which cannot fail but be of very great interest and advantage.

Washington, D. C., Nov. 25, 1858.

\* \* \* A well conducted weekly medical paper will be a great advantage to the profession, by giving the news at an early date, and in such supplies as not to encroach too much upon the time of the physician, however he may be engaged. In this respect the advantages to the country practitioner, who has but little time to peruse our voluminous quarterlies and other publications, will be very great.

Hanna's P. O., Sumner Co., Tenn.

\* \* \* Your journal, in its new form, will fill a void long felt by the profession; and I trust that your laudable attempt to keep the profession posted upon all that is new and interesting to them weekly, will meet with cordial approval and support.

Lancaster, Pa., Nov. 16, 1858.

"I am especially pleased with your Hospital and College Clinical Reports."

Danville, Ky., Dec. 9th, 1858.

"Your *REPORTER* is well thought of by all members of the Profession here who have seen a copy. Truly it is the best journal of the kind that I am acquainted with, and I can say it with pride to the younger members of the Profession in particular, that if they should fail in making out a correct diagnosis in a difficult case, they could not call a better friend to their aid than by consulting the pages of the *REPORTER*, which is, I believe, destined to be a complete text book of most diseases peculiar to our climate."

Baltimore, Md., Dec. 11th, 1858.

## HOME FOR INVALIDS WITH DISEASES OF THE CHEST.

S. W. CORNER OF CHESTNUT AND PARK STREETS,

(On the route of Chestnut Street line of West Philadelphia Omnibuses, and within one square of a Passenger Railway.)

PHILADELPHIA.

This institution has been established with a view to combine all the best hygienic and medicinal means in the treatment of Diseases of the Chest.

Attending Physician,—GEORGE J. ZIEGLER, M. D.

Consulting Physician,—PROF. SAMUEL JACKSON, M. D.

Application for admission may be made to the Attending Physician daily, (Sundays excepted,) from 11 to 12 o'clock. Applications in writing, or letters of inquiry, may be addressed to

JAS. W. WHITE, Sec'y,

No. 107, t. L.

Box 1738, Philadelphia P. O.

JACOB LUTZ,

MANUFACTURER OF

MAHOGANY AND MOROCCO CASES,

No. 109 SOUTH EIGHTH STREET,

(Second Story.)

PHILADELPHIA.

Cases for Surgical, Dental, Musical, and Mathematical Instruments, Jewelry, Silver Plate, Swords, Guns, Pistols, &c.

ALLOPATHIC AND HOMOEOPATHIC BOTTLE CASES.

—Jeweler's Show Cases and Traveling Trunks fitted up in the neatest style; also Fire-proof Drawers lined.

## NOW READY,

THE PHYSICIAN'S

## HAND-BOOK OF PRACTICE

FOR 1859.

By WILLIAM ELMER, M. D.

Containing a classification of Diseases, with their distinguishing symptoms, complications, etc.; an Alphabetical List of Remedical Agents, with their medical properties, preparations and doses; a Classical List of Poisons, with their symptoms and antidotes; Marshall Hall's Ready Method in Asphyxia; Examples of Extemporaneous Prescriptions, etc., etc. To which are added blank pages, so arranged that wherever we open, on the left-hand page are blanks for the record of daily visits, and on the right for symptoms and treatment.

The plan of the work is such, in the present issue, that the patient's name requires to be but once written for the whole year; and though the book is smaller than last year by over fifty pages of blank matter, the physician's purposes are better served, and a larger business can be recorded. There are two sizes, the same as last year, at \$1 25, \$1 50. W. A. Townsend & Co., Publishers, 377 Broadway, New York.

N. B.—The book ordered of the author, No. 68 West 26th St., New York, will be sent to any part of the country postage paid, on the reception of the price in current funds or postage stamps.

No. 109, 8 w.

# BULLOCK & GRENSHAW,

## DRUGGISTS, MANUFACTURING CHEMISTS,

AND

IMPORTERS OF FINE DRUGS, CHEMICALS, CHEMICAL APPARATUS, ANATOMICAL PREPARATIONS, &c., &c.,

Sixth Street, 2d door above Arch Street, Philadelphia.

HAVING devoted special attention during the past nine years to supplying Physicians with their Drugs, &c., we offer the inducement of a varied stock, comprising nearly all the wants of the Medical Practitioner.

Drugs selected from the best in our own and foreign markets; Medicinal Preparations made in our own Laboratory, in strict accordance with the U. S. Pharmacopœia; new remedies of worth; Pharmaceutical Apparatus; Surgical Instruments; Office Furniture; Anatomical Preparations; Chemical Apparatus; and PURE RE-AGENTS, suited to examinations of Urine, Toxicology, and general or special analysis.

URINOMETERS, SPECIFIC GRAVITY BOTTLES, SADDLE-BAGS, POCKET MEDICINE CASES, GRADUATED MEASURES, FUNNELS OF GLASS AND PORCELAIN, LAMPS FOR ALCOHOL OF VARIOUS PATTERNS, INFUSION AND DISPLACEMENT APPARATUS, PORCELAIN DISHES AND CERATE CUPS FOR STANDING HEAT, GRADUATED PILL TILES, BRASS PILL MACHINES, BLEEDING BOWLS, MORTERS, &c., &c.

### PILLS OF THE U. S. PHARMACOPCEIA COATED WITH SUGAR,

EMBRACING, AMONG OTHERS,

Pil. Cath. Comp.:  
Pil. Rhei:  
Pil. Rhei Comp.:  
Pil. Assafet.:  
Pil. Assafet. Comp.:  
Pil. Ferri, (Quevenne):  
Pil. Ferri Comp.:



Pil. Opii.:  
Pil. Hydrarg.:  
Pil. Calomel  
Pil. Calomel Comp.,  
(Plummer's):  
Pil. Copaibæ:  
Pil. Aloes:

Pil. Ferri Carb.,  
(Vallet's):  
Pil. Stomachicæ,  
(Lady Webster's):  
Hooper's Female Pills:  
Pil. Quin. Sulph., 1 gr.:  
&c.

GRANULES of Morphia, Strychnia, Atropia, Digitaline, Arsenious Acid, Euterium, and other concentrated Medicines.

### ANATOMICAL PREPARATIONS.

Auzoux's celebrated Preparations in Papier Mache imported to order.

 Electro-Magnetic Machines, for Medical Purposes. 

MEDICAL SADDLE-BAGS OF OUR OWN MANUFACTURE.

Illustrated and Priced Catalogues of Drugs, Medicines, &c.; also of Chemicals and Chemical Apparatus,

Will be furnished on application, or forwarded by mail. Also, Estimates of Outfits for Physicians commencing Practice, to cost fifty dollars and one hundred dollars.



drawn forward to fill the former, and the regio pubis furnished the supply for the latter. The three flaps were united by eleven sutures. On the third day the scrotal portion of the new covering showed some gangrenous spots, on account of which aq. chlorata was added to the cold fomentations. On the fourth day the sutures of this portion gave way, requiring the application of some renewed sutures.

The preputial portion retracted very little, and granulated finely, while the pubic portion retracted much, and yielded little advantage to the result. In five weeks time the wound was cicatrized, leaving no deformity nor disability of the organ.

**Iodide of Potassa—An Antigalactic:** By PROF. ROUSSET. (Journ. de Bord. May, 1858.)—The enlargement of the galactophorous tubes, so often occurring during early lactation, frequently induces fever, inflammation and abscesses of the mamms, which indicate therapeutical treatment, for the purpose of diminishing the lacteal secretion. As the remedies usually resorted to seldom accomplish the desired effect speedily, Prof. Rousset gave iodide potassium with favorable effects, in all instances hitherto experimented on. He observed the secretion of the milk to decrease considerably, more especially if the child was not put to the breast. The milk returns if the remedy has not been used for more than two or three days. The effect is more decided if not more than 40 or 50 centigrammes are given daily. The lacteal secretion can be entirely suppressed if the remedy is administered one or two days after delivery.

**Gangrene cured by the use of Pyroligneous Acid.**—In the *N. A. Med. Chirurg. Rev.*, we find the report of a case of gangrene, cured by the employment of the pyroligneous acid, by Dr. A. Lopez, of Mobile, Ala. The patient had sphacelation of the entire hand from the tips of the fingers to the wrist, with enormous swelling, the result of a mal-treated phlegmonous abscess. At first he used carrot, yeast and bark poultices, with nitric acid washes and other remedies, with some benefit, but this not being satisfactory, Dr. L. applied a solution of one part of pyroligneous acid and three parts water, by means of cloths. In less than twenty-four hours the intolerable felon was removed, and a manifest improvement presented in the appearance of the wound. Sloughing was completed, and finally a perfect cure was the result. He has since employed it with equal satisfaction.

## Medical News.

### MARRIAGES.

**DOWLING—RUSSELL.**—Dec. 14th, at Warrenburgh, N. Y., by Rev. Dr. Dowling, John W. Dowling, M. D., of New York city, (son of the officiating clergyman,) to Miss Minerva, daughter of Hon. Joseph Russell, of the former place.

**FANNING—BURBANK.**—Dec. 8th, at Bethel, Me., Miss Isabella G., youngest daughter of Dr. Joshua Fanning, to A. L. Burbank, Esq., all of Bethel.

**HARDWICK—STADLEMAN.**—On the 25th of November, by the Rev. Luther E. Albert, Dr. John R. Hardwick, of New Albany, Georgia, to Miss Louisa Stadleman, of Germantown.

**NICHOLLS—GARBER.**—Dec. 9th, in this city, by Rev. D. A. Nicholls, Dr. Phineas P. Nicholls, of Cold Water, Mich., to Miss Salie Garber, of this city.

### DEATHS.

**TAYLOR.**—In New Alexandria, Pa., on the 13th of November, Mrs. Catharine R., wife of Dr. G. W. Taylor, aged 35 years.

**WOODLAND.**—In Sacramento, Cal., on the 17th ult., Mrs. Maria J., wife of Dr. Thomas W. Woodland, and daughter of Isaac Myer, Esq., of this city.

**MARRIAGES OF CONSANGUINITY.**—Dr. S. M. Bemis, in his able report on this subject to the American Medical Association, at its meeting in Washington, last May, says that over ten per cent. of the deaf and dumb, over five per cent. of the blind, and near fifteen per cent. of the idiotic in our State institutions, subjects of these defects, are the offspring of kindred parents.

Such facts would seem to justify the Legislature of Georgia in having recently passed a bill prohibiting the marriage of first cousins, under heavy penalties, one of which is cutting off the issue from inheritance.

☞ We learn from the *Lancet* and *Observer* that the ardent quackery of the Cincinnati "Eclectic" is growing more and more apparent.

☞ Dr. Mendenhall has retired from his connection with the Cincinnati *Lancet* and *Observer*, leaving it in charge of Drs. Murphy and Stevens.

**TO CORRESPONDENTS.**—We have received the following publications from the publishers, Messrs Lea & Blanchard:

1. *Erichsen's Science and Art of Surgery.*

2. *Concise on Diseases of Children*, a new edition.

3. *Hunter and Ricord on Venereal*, by Bumstead.

Also, the following:—

*The Physician's Hand Book of Practice and Pocket Memorandum* 1859, by Dr. Wm. Elmer.

*The Physician's Visiting List*, from C. J. Fries & Co.

*The Dental Register of the West*, in Exchange.

*Our Medical Colleges.* An introductory lecture to the course of 1858-9, in the Medical Department of the University of Nashville. By J. Berrien Lindsay, Chancellor of the University. From the author.

*On Vesico Vaginal Fistula, and its Successful Treatment.* Illustrated by eleven cases. Read before the British Medical Association, at Edinburgh, July 31, 1858. By I. Baker Brown. F. R. C. S., etc., etc. From the author.